

Application for Admission
To
Cumberland Baptist Institute
852 Parkers Mill Road
Somerset, Kentucky 42501

Last Name _____ First Name _____ M.I. _____ Date _____

Home Address _____ Phone () _____

City _____ State _____ Zip _____

Date of Birth _____ Age _____ Place of Birth _____

Parent, Guardian or next of kin _____ Phone () _____

Address _____ City _____ State _____ Zip _____

Are you a Minister? _____ Licensed? _____ Ordained? _____ Other Calling? _____

Are you: Single Engaged Married Divorced

Name of Spouse _____ Ages of Children _____

When were you saved? _____ Church you were baptized by _____

Church Membership _____ Address _____

How did you hear about Cumberland Baptist Institute? _____

List schools attended – high school and beyond (include GED information if applicable)

Name of School	Address	Date entered	Date graduated
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Were you ever dismissed from any school? _____ If so, why? _____

Application for admission is for: Fall Spring Year _____

Give name and address of your Pastor for personal reference and ask each to send a letter of recommendation to this Institute.

Pastor _____

Why are you considering Cumberland Baptist Institute as the place to further your education? _____
